

Docket No. CDS-0215

Secur #
3

Applicants : Randy Bower et al.

Serial No. : 09/482,599

Art Unit: 1744

Filed : January 13, 2000

Examiner: Roscoe Brown

For : FAILURE DETECTION IN AUTOMATED CLINICAL ANALYZERS

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Box Missing Parts, Assistant Commissioner for Patents, Washington, DC 20231 on

March 23, 2000

(Date of Deposit)

Todd. F. Volyn

(Name of applicant, assignee, or Registered Representative)

Todd F. Volyn

(Signature)

March 23, 2000

(Date of Signature)

BOX MISSING PARTS
Assistant Commissioner for Patents
Washington, D.C. 20231

SUBMISSION OF COMBINED DECLARATION AND POWER OF ATTORNEY

Dear Sir:

Pursuant to Rule 53(f) and Rule 54, please find enclosed Combined Declarations and Powers of Attorney for the application of Randy Bower et al. entitled FAILURE DETECTION IN AUTOMATED CLINICAL ANALYZERS Attorney Docket No. CDS-0215, to complete, pursuant to Rule 51, this application filed on January 13, 2000 by Express Mail pursuant to Rule 10. As required, a copy of the Notice to File Missing Parts of Application is also attached.

DOCKET NO. CDS-0215
SERIAL NO. 09/482,599

Please charge Johnson & Johnson Deposit Account No. 10-0750/CDS-0215/TFV in the amounts of \$130.00 for submission of the Declaration pursuant to Section 1.16(e). The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Account No. 10-0750/CDS-0215/TFV. This sheet is submitted in triplicate.

Respectfully submitted,

Todd F. Volyn
Todd F. Volyn
Reg. No. 37,463
Attorney for Applicant(s)

Johnson & Johnson
One Johnson & Johnson Plaza
New Brunswick, NJ 08933-7003
(732) 524-6202
March 23, 2000



Docket Number: CDS-0215
Serial Number: 09/482,599

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled FAILURE DETECTION IN AUTOMATED CLINICAL ANALYZERS, the specification of which

(check one) ☐ is attached hereto.

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and was amended on _____.
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I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

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I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Docket Number: CDS-0215
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Prior Foreign Application(s):

Country	Application Number	Date of Filing	Priority Claimed Under 35 U.S.C. 119	
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Inventor's Signature:

Full Name of Sole
or First Inventor

Randy Kristopher Bower

Date: _____

Citizenship: USA

Residence: 298 Fishers Road

Post Office Address: Pittsford, NY 14534

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Full Name of Third Joint
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James David Shaw

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Residence: 58 Hogan Point Road

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(Supply similar information and signature for fourth and subsequent joint inventors.)

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Mark Alan Simon

Date: _____

Citizenship: USA
Residence: 18 Latium Drive
Post Office Address: Pittsford, NY 14534-1650

Inventor's Signature:
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Post Office Address: Rochester, NY 14616

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Joseph John Dambra

Date: _____

Citizenship: USA
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Post Office Address: Rochester, NY 14624

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Date: _____

Citizenship: USA
Residence: 2597 Putnam Road
Post Office Address: Ontario, NY 14519

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Inventor's Signature:
Full Name of Eighth Joint
Inventor, If Any

Merrit Nyles Jacobs

Date: _____

Citizenship: USA
Residence: 3 Foxboro Terrace
Post Office Address: Fairport, NY 14450

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Full Name of Third Joint
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James David Shaw

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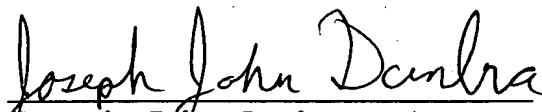
Inventor's Signature:
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Inventor, If Any

Michael Avdenko

Date: _____

Citizenship: USA
Residence: 42 Yorktown Drive
Post Office Address: Rochester, NY 14616

Inventor's Signature:
Full Name of Sixth Joint
Inventor, If Any



Joseph John Dambra

Date: 2/14/00

Citizenship: USA
Residence: 23 White Fawn Run
Post Office Address: Rochester, NY 14624

Inventor's Signature:
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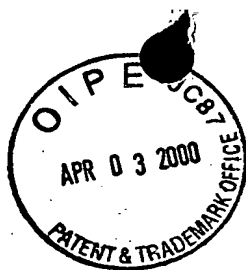
Citizenship: USA
Residence: 3 Foxboro Terrace
Post Office Address: Fairport, NY 14450

Inventor's Signature:
Full Name of Ninth Joint
Inventor, If Any


James Daniel Riall

Date: Feb 14, 2000

Citizenship: USA
Residence: 7118 Highlands Farm Trail
Post Office Address: Roanoke, VA 24018



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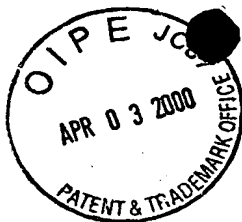
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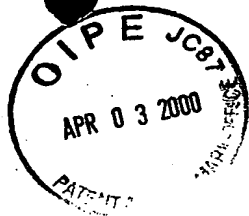
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Status

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith as well as to file equivalent patent applications in countries foreign to the United States including the filing of international patent applications in accordance with the Patent Cooperation Treaty:
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Docket Number: CDS-0215
Serial Number: 09/482,599

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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Serial Number: 09/482,599

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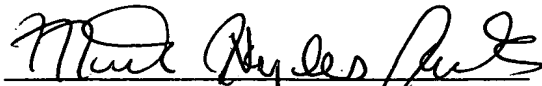
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